

ISSUE SLIP STAPLE AREA (for additional cross-references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | M.O. | 69350 | 6/27/99 |
| O.I.P.E. CLASSIFIER | | 10 | 6/19/99 |
| FORMALITY REVIEW | D.O. | 68971 | 6/17/99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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